								pplication or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								P01,0136					
CLAIMS AS FILED - PART I							SMALL ENTITY			7		RTHAN	
T	OTAL CLAIMS	3	(Colum	in 1)	(Col	(Column 2)		TYPE		OR	SMALL ENTITY		
			9	9				ATE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FE	E 355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		. 0		X	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			Z minus 3 ₹		P		×	40=		OR	X80=	<del></del>	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT	·	<u></u>				1	OR	+270=		
* 11	f the difference	e in column 1 is	less than zero, enter "0" in column 2				<u> </u>	TAL		OR	TOTAL	77	
CLAIMS AS AMENDED - PART II								· IAL	L	JOH			
(Column 1) (Colum						(Column 3)	nn 3) SMALL EN			OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING		HIGH NUME		PRESENT	RATE		ADDI-	1		ADDI-	
		AFTER AMENDMENT		PREVIO PAID I	DUSLY	EXTRA			TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=	X\$	9=		OR	X\$18=	1	
	Independent	*	Minus	***		=	X40=			OR	X80=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									JOH			
								35=		OR	+270=		
							ADDIT	OTAL FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4	0=		OR	X80=	<u> </u>	
	FINOT PRESE	NTATION OF MI	JUIPLE DE	PENDENT	CLAIM	. []	+13	5					
							<u> </u>	OTAL		OR	+270= TOTAL		
		(Column 1)		(Colum		(Column 3)	ADDIT			OR	ADDIT. FEE		
51		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RAT	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$	9=		OR	X\$18=	,	
	Independent	•	Minus	***		=	-			t			
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		X40			OR	X80=		
• If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
İ	he "Highest Num	nder Previously Paid ber Previously Paid	id For IN TH! I For (Total o	s space is Independer	iess thar nt) is the	า 3, enter "3." highest number f			ropriate box				